



Academic Year  
2003-2004

## NIH Undergraduate Scholarship Program for Individuals from Disadvantaged Backgrounds

### APPLICATION CHECKLIST

Please use this checklist to make sure all parts of your application are completed.  
This checklist must be submitted with your application to:

National Institutes of Health  
Office of Loan Repayment and Scholarship-UGSP  
2 Center Drive, Room 2E28 (MSC 0230)  
Bethesda, Maryland 20892-0230

Applicant's Name: \_\_\_\_\_  
Address: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_  
E-mail: \_\_\_\_\_

- ☐ Official transcript (high school and college transcript required for college freshmen).
- ☐ Letter of acceptance (for those entering college for the 2003-2004 academic year).
- ☐ Applicant information form.
- ☐ Undergraduate institution certification form. The applicant should fill out Section A. The form was given to the following representative of the undergraduate institution:

Name and Title: \_\_\_\_\_

Telephone: \_\_\_\_\_

Date: \_\_\_\_\_

- ☐ Applicant recommendation forms. The applicant should fill out Section A of each form. The following persons have been asked to submit recommendations:

1. Name: \_\_\_\_\_

Institution: \_\_\_\_\_

Telephone: \_\_\_\_\_

Date: \_\_\_\_\_

2. Name: \_\_\_\_\_

Institution: \_\_\_\_\_

Telephone: \_\_\_\_\_

Date: \_\_\_\_\_

3. Name: \_\_\_\_\_

Institution: \_\_\_\_\_

Telephone: \_\_\_\_\_

Date: \_\_\_\_\_

- ☐ Contract